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| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

| SUBJECT: BIGFOOT ANTITHEFT AUTOMOBILE LOCKING DEVICE INC. | | | | |
|--|-------------------------|------------------|--------------------|--|
| SUBJECT: BIGFOOT ANTITHEFT AUTOMOBILE LOCKING DEVICE INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) | | | | |
| | | | | |
| Enclosed is an original and one(1) copy of the articles of incorporation and a check for: | | | | |
| Enclosed is an original and one(1) copy of the articles of incorporation and a check for . | | | | |
| \$70.00 | □ \$78.75 | № \$78.75 | □ \$87.50 | |
| Filing Fee | Filing Fee | Filing Fee | Filing Fee, | |
| | & Certificate of Status | & Certified Copy | Certified Copy | |
| | | | & Certificate of | |
| | | ADDITIONAL CO | Status PV REQUIRED | |
| ADDITIONAL COIT REQUIRED | | | | |
| FROM: | | | | |
| JOE BARRETT | | | | |
| Name (Printed or typed) | | | | |
| | | | | |
| POST OFFICE BOX 552667 | | | | |
| Address | | | | |
| • | | | | |
| OPA LOCKA, FL 33056 | | | | |
| City, State & Zip | | | | |
| | | | | |
| (305) 892–2862 Daytime Telephone number | | | | |

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

BIGFOOT ANTITHEFT AUTOMOBILE LOCKING DEVICE INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

POST OFFICE BOX 552667 OPA LOCKA, FL 33056

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

25

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

JOE BARRETT 14125 N. E. 3rd COURT NORTH MIAMI, FL 33165

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

JOE BARRETT POST OFFICE BOX 552667 OPA LOCKA, FL 33056

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Incorporator

26th Jany 204 Date 26th Janey 201